



State of California-Health and Human Services Agency
Department of Health Services



ARNOLD SCHWARZENEGGER
Governor

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CHDP Provider Information Notice No.: 04-11

Corrected Version

TO: ALL CHILD HEALTH AND DISABILITY PREVENTION (CHDP)
PROGRAM PROVIDERS

SUBJECT: AUTOMATIC MEDI-CAL ENROLLMENT FOR INFANTS THROUGH THE
CHDP GATEWAY

The purpose of this Provider Information Notice is to announce enhancements to the CHDP Gateway, effective June 1, 2004, that will automatically allow enrollment of eligible infants under one year of age into Medi-Cal, without requiring their parent(s) to complete a joint *Healthy Families/Medi-Cal application* (MC 321). Through a single CHDP Gateway transaction in the provider's office, eligible infants will be enrolled in full-scope, no-cost Medi-Cal. These infants remain eligible until their first birthday as long as they continue to meet eligibility requirements. With implementation of infant enrollment, providers no longer need to make newborn referrals.

Eligible infants are those under one year of age whose mothers had Medi-Cal eligibility at the time of delivery, who lived with the mother during the month of birth, and continue to reside with the mother in California. Those eligible include infants whose mothers were enrolled in a Medi-Cal Managed Care plan, as well as those whose mothers had Medi-Cal with a *Share of Cost* that was met at the time of birth.

CHDP Gateway Pre-Enrollment Application

In order to link the infant with the mother whose delivery was covered by Medi-Cal, three data fields have been added to the CHDP Gateway Pre-Enrollment Application (DHS 4073, revised 06/04), as attached. In the "For Patients Under One Year of Age, Please Complete this Section" area of the DHS 4073, the following three fields are now included:

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- If younger than one year of age, did the infant live with the mother in the month of birth?
- Mother's Date of Birth.
- Mother's Benefits Identification Card (BIC) ID number or Social Security Number.

An "infant enrollment" flyer explaining this automatic enrollment process is available in English and Spanish for distribution to parents of infants younger than one year of age. The provider's office should give this notice, along with a DHS 4073 (revised 06/04) to families of infants younger than one year of age who have no other health insurance coverage at the time of a CHDP health assessment. This infant enrollment flyer will be shipped to local CHDP programs before the June 1, 2004 implementation date. Local CHDP programs will distribute the flyers to provider offices. The flyers will also be available to download from either the CHDP or Medi-Cal website by June 1, 2004 and is also included as an attachment.

To maximize successful enrollment of eligible infants into full-scope, no-cost Medi-Cal, provider staff are reminded to ask parents of infants younger than one year of age to complete the three data fields described above. Providers may obtain copies of the revised DHS 4073 form from their local CHDP program or download the form from the CHDP Website, www.dhs.ca.gov/chdp or Medi-Cal Website, www.medi-cal.ca.gov.

The automatic Infant Enrollment process will be implemented on June 1, 2004. To begin making the transactions using:

- Point of Services (POS) Device transactions:
 - Starting May 22, 2004, the CHDP updated software to your POS Device (VeriFone Omni 3300) will be available for automatic download.
 - Any POS transaction (Eligibility, CHDP, SOC) will automatically trigger the download. The updated software will be available the day following the download.
 - Prior to June 1, 2004, any provider office submitting transactions that include the three newborn data fields, will receive the following message: *"Reminder – newborn enrollment transactions not available until June 1, 2004."*

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- To submit a CHDP Gateway transaction that includes newborn enrollment on or after June 1, 2004, you must perform a POS transaction that initiates automatic download of the updated POS software sometime between May 22, 2004 and May 31, 2004.
- Internet:
 - An Update to the Gateway Internet enrollment interface will be installed and automatically available for use on June 1, 2004.

Immediate Need Eligibility Document

If the transaction successfully links the infant with the mother who was Medi-Cal eligible at the time of delivery, one of the following messages will appear on the *Immediate Need Eligibility Document*:

Message	Meaning	Next Steps
<i>Your infant is eligible for full-scope, no-cost Medi-Cal back to the date of birth. No Medi-Cal application is needed. You will receive additional information from your county. Use your infant's Benefits Identification Card (BIC) to access Medi-Cal services.</i>	The infant met the eligibility requirement for full-scope, no-cost Medi-Cal back to the date of birth. No joint HF/Medi-Cal application was mailed. The pre-enrollment application indicates the applicant already has a BIC.	<ol style="list-style-type: none">1. Keep a copy for your files, staple the printout to the "Infant Enrollment" flyer and give it to the parent/guardian.2. Complete the second step and check the infant's eligibility. Enter the BIC located on the bottom of the Gateway response to see the services the infant is eligible for.
<i>Your infant is eligible for full-scope, no-cost Medi-Cal back to the date of birth. No Medi-Cal application is needed. You will receive additional information from your county. Use this document to access Medi-Cal services until the infant's Benefits Identification Card (BIC) arrives.</i>	The infant met the eligibility requirement for full-scope, no-cost Medi-Cal back to the date of birth. No joint HF/Medi-Cal application was mailed. The pre-enrollment application indicates the applicant does not have a BIC.	<ol style="list-style-type: none">1. Have the parent or guardian sign the printout.2. Keep a copy for your files, staple the printout with the original signature to the "Infant Enrollment" flyer and give it to the parent or guardian.3. Complete the second step and check the infant's eligibility. Enter the BIC located on the bottom of the <i>Immediate Need Eligibility</i> document to find out the services that the infant is eligible for.

Message	Meaning	Next Steps
<i>Your infant is eligible for full-scope Medi-Cal. No other application is required. Your infant has a Share of Cost from birth month through last month. You will receive a request for income verification and more information from your county. Beginning this month and until the county can verify your income, your infant has no share of cost. Use the infant's Benefits Identification Card (BIC) to access services.</i>	The infant met the eligibility requirement for full-scope SOC Medi-Cal back to the date of birth through last month. The county will request income verification and other additional information. No joint HF/Medi-Cal application was mailed. The pre-enrollment application indicated that the applicant does have a BIC card.	<ol style="list-style-type: none"> 1. Keep a copy for your files, staple the printout to the "Infant Enrollment" flyer and give it to the parent or guardian. 2. Complete the second step and check the infant's eligibility. Enter the BIC ID number located on the bottom of the Gateway response to find out the services that the infant is eligible for.
<i>Your infant is eligible for full-scope Medi-Cal. No application is required. Your infant has a Share of Cost from birth month through last month. You will receive a request for income verification and more information from your county. Beginning this month and until the county can verify your income, your infant has no Share of Cost. Use this document to access services until the Infant's Benefits Identification Card (BIC) arrives.</i>	The infant met the eligibility requirement for full-scope SOC Medi-Cal back to the date of birth through last month. The county will request income verification and other additional information. No joint HF/Medi-Cal application was mailed. The pre-enrollment application indicated that the applicant does not have a BIC.	<ol style="list-style-type: none"> 1. Have the parent or guardian sign the printout. 2. Keep a copy for your files, staple the printout with the original signature to the "Infant Enrollment" flyer and give it to the parent or guardian. 3. Complete the second step and check the infant's eligibility. Enter the BIC ID number located on the bottom of the <i>Immediate Need Eligibility</i> document to find out the services that the infant is eligible for.

If the transaction **does not** link the infant with the mother, the Medi-Cal eligibility verification system will determine the infant's pre-enrollment eligibility, returning a message indicating one of the following:

- The establishment of temporary Medi-Cal.
- The establishment of CHDP eligibility.
- The program for which patient is currently eligible (Medi-Cal or Health Families).
- A denial reason.

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Reminders:

- Before submitting any Gateway transaction, review all data entered for accuracy and make any necessary corrections.
- If the error is identified after the transaction has already been submitted, **do not** submit a second transaction in an attempt to correct an error.
- After the Gateway transaction is completed, it is necessary to do an eligibility verification check to determine the range of services the infant is eligible for.
- Providers are reminded to use the infant's BIC number that appears on the *Immediate Need Eligibility* document for billing purposes, along with the assigned Gateway Aid Code and county code. This BIC number may also be used to bill the Medi-Cal fee-for-services program for subsequent medically necessary services.

The CHDP Provider Manual is being updated to include information on Infant Enrollment. Additional information about the CHDP Gateway is available on the CHDP Website, www.dhs.ca.gov/chdp. Your continuing participation in the CHDP program is greatly appreciated. If you have any questions, contact your local CHDP office.

Original signed by Marian Dalsey, M.D., M.P.H.

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Enclosures